

SC Department of Disabilities and Special Needs DAY ACTIVITY SERVICE STANDARDS

The mission of SCDDSN is to assist people with disabilities and their families through choice in meeting needs, pursuing possibilities and achieving life goals and minimize the occurrence and reduce the severity of disabilities through prevention. Consistent with the agency's mission, the intent of DDSN Day Activity Services is to provide people with Mental Retardation/ Related Disability (MR/RD), Autism, and Head and Spinal Cord Injuries and Similar Disability (HASCI) the supports needed in order for them to meet their needs, pursue possibilities and achieve their life goals.

DEFINITION

Day activity services are supports and services provided in therapeutic settings to enable participants to achieve, maintain, improve, or decelerate the loss of personal care, social or adaptive skills. Services are provided in non-residential settings that are licensed by the state. Community activities that originate from a facility licensed by the state will be provided and billed as Day Activity Service. On site attendance at the licensed facility is not required to receive services that originate from the facility.

Transportation will be provided from the participant's residence to the habilitation site when the service start time is before 12:00 Noon. Transportation will be available from the participant's habilitation site to their residence when the service start time is after 12:00 Noon.

ANTICIPATED OUTCOMES

For a limited number of people (ex. elderly, those with significant medical conditions, those with significant psycho-social risk factors), other day support options may be inappropriate or undesirable. As an alternative, Day Activity Service allows people to spend time away from home in a supervised setting where person-centered activities enable them to actualize their potential, meet their goals and enjoy new experiences.

It is expected that SCDDSN Day Activity Service be provided in a manner that promotes:

- Dignity and respect
- Health, safety and well-being
- Individual and family participation, choice control and responsibility
- Relationships with family and friends and community connections;
- Personal growth and accomplishments

It is also expected that Day Activity Service reflect the principles of the agency and therefore services should:

- Be person centered
- Be responsive, efficient, and accountable
- Be strengths-based, results oriented
- Maximize potential
- Be based on best and promising practices

Day Activity Service will be provided in accordance with all state and federal laws.

	Standard	Guidance
1	Day Activity Service will only be provided in or originate	Please refer to SCDDSN Standards for
	from facilities licensed by SCDDSN as Day Facilities	Licensing Day Facilities
2	Day Activity Service will be provided in accordance with applicable SCDDSN Departmental Directives, procedures and guidance.	A Program Director may serve more than one program.
3	Day Activity Service will only be provided by SCDDSN qualified Day Services providers.	
4	Each program will designate a Program Director who meets the following minimal qualifications: Is at least twenty-one years old. Have a four-year, baccalaureate degree from an accredited college or university in the human services or related field and two year's experience in administration or supervision in the human services field or have a master's degree from an accredited college or university in the human services or related field and one year's experience in administration or supervision in the human services Have references from past employment.	
5	Each program will employ direct care staff who meet the following qualifications: Is at least eighteen years old. Have a valid high school diploma or its certified equivalent. Have references from past employment if the person has a work history.	
6	Staff must meet requirements for criminal background checks.	Checks should be done in accordance with Department Directive 406-04-DD. No support provider may be employed who has been convicted, pled guilty or nolo contendere to: 1. Abuse, neglect or mistreatment of a consumer in any health care setting; 2. An "Offense Against the Person" as provided for in Chapter 3, Title16; 3. An "Offense Against Morality or Decency" as provided for in Chapter 15, Title 16; 4. Contributing to the delinquency of a minor as provided for in Section 16-17-490 5. The common law offense of assault and battery of a high and aggravated

	Standard	Guidance
		nature; 6. Criminal domestic violence, as defined in Section 16-25-20 7. A felony drug-related offense under the laws of this state; and 8. A person who has been convicted of a criminal offense similar in nature to a crime previously enumerated when the crime was committed in another jurisdiction or under federal law; has a substantiated history of child abuse and/or neglect and/or convictions of those crimes listed in SC Code 20-7-1642 and/or is listed on the SC Sex Offender Registry
7	Staff must pass an initial physical exam prior to working in the program.	Pass = No documentation in the physical exam report of conditions present that would jeopardize health and safety of people receiving services or staff's ability to perform required duties.
8	Staff must pass initial tuberculosis screening prior to working in the program and annually thereafter.	Pass = no evidence of communicable disease. Meets requirements of 603-06-DD.
9	Staff must be trained and be deemed competent in accordance with Department Directive 567-01-DD.	
10	There will be a staff development / in-service education program operable in each provider agency which requires all staff to participate in in-service education programs and staff development opportunities.	From 567-01-DD, staff must periodically be required to demonstrate continuing competency on the most critical information and skills taught in the curriculum. Providers have wide latitude in designing the format of such rechecks. Encouraging staff commitment to continuing personal and professional development will expand the capacity to provide quality service and supports. Staff should routinely be exposed to information regarding training resources and opportunities. Supervisors should be working with staff to identify annual personal and professional goals.
11	 Each program will have written policies on: Use of volunteers and substitutes; Program evaluation; Administration of medication; Admission and discharge of participants; Personnel practices Procedures to be followed when a participant is discovered to be missing. Termination of participants from the program which include: 	

	Standard	Guidance
12	 A list of reasons for dismissal; Methods of averting the termination; When consultation and concurrence with the Department prior to termination will be sought. Keeping and managing a waiting list for those who are seeking entry into each service provided in the program that includes the frequency with which the list will be reviewed. People receiving Day Activity Service are free from abuse, peoplect and exploitation.	
	neglect and exploitation. People receiving Day Activity Service are: Informed of their rights Supported to learn about their rights Supported to exercise their rights	
13	People receiving Day Activity Service are: Informed of their rights Supported to learn about their rights Supported to exercise their rights	Rights include: Human rights, Constitutional rights and Civil rights • Training includes responsibilities as well as rights. • Each person's right to privacy, dignity and confidentiality in all aspects of life is recognized, respected and promoted. • Personal freedoms are not restricted without due process. • People are expected to manage their own funds to the extent of their capability. • Due process is upheld, including the Human Rights Committee review of restriction of personal freedoms. People with limited knowledge and experience receive training and opportunities to explore their individual rights and the responsibilities that accompany them
14	Day Activity Service will only be provided to those who are authorized by a DSN Board or contracted Service Coordinator.	Service Coordination will provide the chosen Day Activity Service provider with a referral notification that at a minimum includes the following information: • Consumer information: (name, address, DOB, referral date, SS#, Medicaid # (when applicable), emergency

	Standard	Guidance
		contact information, and name of referring Service Coordinator) Authorization of service, number of authorized units Additional information: (Critical and emergency information, health/medical information, and care and supervision information
15	Psychological evaluations are required. Adults shall be tested using a restrictive test of intelligence administered by a licensed or certified psychologist on program entry, reentry or at age twenty-two (22) whichever occurs first, unless there is a valid psychological evaluation completed within three years of admission on record.	For adults, at the time of program entry, a psychological evaluation that was completed at age 22 or is less than 3 years old must be available for new program participants. In lieu of a psychological evaluation, a current (i.e., within one year of program entry) ICF/MR Level of Care (LOC) Determination that indicates the LOC criteria were met may be used. For example, if a 35 year old participant were entering the program on March 25, 2008, one of the following could be accepted: • A psych. eval. completed when he/she was 22 (1995) [on program entry, re-entry or at age twenty-two (22) whichever occurs first! • One completed within the last 3 years (2005-2008) [unless there is a valid psychological evaluation completed within three years] • Or a current LOC Determination that is based on a psychological evaluation completed from 1995 until 2005.
16	Individuals receiving Day Activity Service are supported to make decisions and exercise choice regarding the specific Day Activity services they will receive.	
17	Within 15 business days of receipt of a referral, the Day Activity Service provider will notify the referring Service Coordinator in writing of their intent to: Accept the person for service, or Accept the referral for placement on the provider's waiting list, or Reject the referral	

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18	After acceptance into service but prior to providing Day Activity Services, a preliminary plan must be developed that outlines the care, supervision and skills training/interventions to be provided.	Plan must include essential information to ensure appropriate services and supports are in place to assure health, safety, supervision and rights protection.
19	At the time of admission/entry into Day Activity Service, the preliminary plan must be implemented.	Preliminary Plan is to be implemented on the day of admission. When assessments are completed and training needs/priorities have been identified, the plan will be completed and will replace the Preliminary plan.
20	Within thirty (30) calendar days of admission/entry into Day Activity Service and annually thereafter an assessment will be completed that identifies the abilities/strengths, interests/preferences and needs of the person in the following areas:	At a minimum, assessments must be completed every 12 months
21	Based on the results of the assessment, within thirty (30) calendar days of admission and annually thereafter, a plan that outlines the Day Activity services and supports to be provided is developed with participation from the individual and/or his/her legal guardian.	At a minimum, the plan must be completed every 12 months.
22	A description of the interventions to be provided including time limited and measurable goals/objectives. A description of the type and frequency of	The Day Activity Plan is developed to identify: Activity interests; goal(s) the individual desires to achieve; objective(s) for each goal identified; and essential information to maintain the individual's health, safety and welfare during the course of the program. Documentation of the description of how
	 A description of the type and frequency of supervision to be provided. 	each intervention must be provided to indicate the data to be collected, and schedule for implementation.
	Emergency contact information.	In accordance with Department Directive 510-01-DD, services provided shall include the provision of any interventions and

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		supervision needed by the person for dining/eating. The interventions to be provided must be based on assessed needs. Supervision must encompass any time outside of the actual unit time when the person is present and supervision is needed.
	 Current and comprehensive medical information. 	All critical and emergency information for this individual must be documented in the plan.
	 Any information necessary to support the person in a Day Activity setting. 	Medications (medications taken by the individual must be listed and any assistance of medicating must be documented (self medicate or assisted medicate). All known relevant medication information must be documented. All specific instructions concerning individual reactions, side effects or restrictions to medicine must be documented.
23	The interventions in the plan must support the provision of	
24	Day Activity Services as defined in these standards. As soon as the plan is developed, it must be implemented.	
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25	Data must be collected as specified in the plan and must be sufficient to support the implementation of the plan for each unit of service reported.	Data must specify the amount of time the service was provided and must be sufficient to measure progress toward attainment of the goal or objective.
26	Data entries must be:	
27	At least monthly, the plan is monitored by the Program Director or his/her designee to determine its effectiveness.	The Program Director's or designee's signature on the Monthly Data Recording Sheet signifies that the plan has been monitored.
28	The plan is amended when significant changes to the plan are necessary.	
29	A record shall be maintained, for each participant, which contains, at a minimum, the items listed below. All documents and entries shall be legible, dated, and signed by the person making the entry. If symbols are used, explanatory legends must be provided.	Record of illnesses and accidents will be maintained for those accidents that occur during service provision and for illnesses made known to the provider.

	Standard	Guidance
	 Report of a medical examination which was performed not more than twelve (12) months prior to admission; Report of psychological evaluation(s) as required by these standards; Current Plan that supports the provision of the service provided; Monthly summary notations of progress; (Monthly Data Recording Sheet) Record of unusual behavior incidents which are recorded at the time of occurrence; Record of illness and accidents; Authorization for emergency medical service and medication administration; Record of critical incidents. 	
30	Any evidence of illness or injury shall be documented in the participant's record and action shall be taken to obtain necessary medical treatment of the individual and to safeguard others from contagion.	
31	Reporting requirements are performed correctly.	 According to the DDSN Finance Manual and applicable Departmental Directives. Reporting of Critical Incidents Death or Impending Death of Persons Receiving Services Community Financial Reporting Requirements Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contract Provider Agency